Choosing a Method

By the end of this lesson, you should be able to:

- Analyze what method of contraception may be the best option for you; and,
- Dispel contraception myths.

We want to take an opportunity to clear up some things we’ve heard over the years, including how contraception works, side effects, and other factors. Sometimes, misinformation can keep people from using contraception correctly and consistently. We want to make sure that you have the complete story so that you can make informed decisions.

Contraception does not always immediately protect a person as soon as they start using it.

Every method has a different time period for when it becomes fully effective. Some of this depends on where a person is in their menstrual cycle when they initially start using the method, which is especially true for methods that contain hormones. Other methods only need a short period of time. For example, spermicide takes 10 minutes to be active. Talk to your provider about how long you need to wait until your chosen method becomes fully effective. If you’re using over-the-counter methods, like the sponge, read the entire label before use.

Some medications and supplements can cause certain forms of hormonal contraception to be less effective.

Possible culprits include some HIV medications, St. John’s wort, seizure medications, oral medications to treat yeast infections, and the antibiotic rifampin. If you are looking to use contraception, it’s very important to let your provider know all medications and supplements you’re on so that they can tell you if there are any contraindications.

Hormonal Contraception and Infertility
We’ve also heard people say that using hormonal contraception makes it harder to get pregnant later in life.
Well, that’s just plain not true. Once a person stops using these methods, the hormones leave the body and don’t alter the reproductive system. Their job is to send a message to the ovaries to not release an egg and to thicken the cervical mucus, but once the hormones are gone, these messages aren’t sent. Some people who have trouble conceiving mistakenly think that the hormones were the cause of their infertility. In reality, most people with this issue wouldn’t have been able to get pregnant before they started using one of these methods.

One of the major reasons people say they don’t like to use hormonal contraception is because of the side effects.

Common complaints include weight gain, headaches, breast tenderness, or a change in sex drive. The thing is, when using a form of hormonal contraception, the user needs to give their body time to adjust to the hormones. For most people, these side effects go away within the first 3 to 6 months. If after that time a person is still having issues, they should talk with their provider. There are so many different chemical combinations of pills alone. Other methods don’t have estrogen, or have lower levels. It’s all about finding something that’s right for each person’s body.

Let’s clear up a few more things about those side effects. Some of them may simply be lifestyle related. Hormonal birth control does not directly cause a person to gain weight, but it can actually increase appetite; if the user consumes excess calories, they might gain weight. Stress or other major life events can impact sex drive or cause headaches.

Some forms of hormonal contraception alter the duration or flow of a person’s period, like making it shorter and with less cramps. Some forms stop it completely, and that can scare some people. It is completely safe and healthy to not have a period. If you really think about it, a period while on hormonal contraception is not a true period because there is no egg that is leaving the body. In reality, the body is not even able to menstruate unless it has the proper diet and nutrition to support it. If a person is on a method that stops their period completely, it’s not like the uterine lining keeps building thicker and thicker until it explodes. It just never reaches the point where it needs to shed. If the body does need to do this, it will in the form of spotting, breakthrough bleeding, or a full-on
period. Hormonal methods go through years of rigorous testing and FDA approval to get to the public. If they weren’t safe, we wouldn’t have access to them.

Remember, if you want to go hormone-free, there are lots of other methods to choose from!

Another common concern we hear is in regard to the safety of hormonal contraception. You may have heard about the risk of blood clots, heart attack or strokes. Overall, hormonal contraception is super safe for healthy people, and a whole lot safer than being pregnant. If a person already has other medical issues, or if they have risk factors like being obese, over 35 years old, or a smoker, they’ll want to have a good conversation with their provider. In some cases, the provider may advise against hormones, or maybe just specific types.

While you may find conflicting studies, the overall consensus is that hormonal contraception does not increase the risk of breast cancer. In some cases, it may actually be a protective factor for ovarian and other reproductive cancers.

People often wonder when there will be a new form of contraception for folks with functioning testes. We keep reading about studies testing the next possibility with the promise that it’s only 3-5 years away. Well, this has been going on for as long as we can remember, and nothing has materialized in reality. The reason this is so difficult comes down to biology. We’re normally talking about preventing one egg from being fertilized. Compare that with the 300-500 million sperm per ejaculation. That’s quite a bit more challenging to pull off without permanently affecting fertility. For now, vasectomies, condoms and withdrawal are what we’ve got to work with. Regardless, both partners should be involved in the discussion about using contraception.

What factors did you consider when choosing a method of contraception?

Video Transcript
Ashlee: I guess the main factor was effectiveness when I chose my method of contraceptives.
Abby: So, when I first became sexually active, we used condoms for a while I think because they seemed like the easiest type of contraceptive to have available. And then after we had been sexually active for a while I got on hormonal birth control.
What factors did you consider when choosing a method of contraception?

Video Transcript Cont’d…

Imani: I chose the pill because I wanted something that I could regulate, that I could be control of.

Heather: The pill was um, kind of chosen for me in the sense that it wasn’t being used as a contraceptive when I was prescribed it. Eventually it became also a contraceptive. I just maintained that because it was something that my body was used to and something that I was used to doing.

Srija: I definitely thought about my personal health and values with that and what I wanted to be putting into my body. And about, realistically, what I could remember to do and what I couldn’t. And definitely, what financial help I needed or whatever kind of student health services benefits I could get.

Ashlee: And also, just the convenience and price, things like that.

Condoms are so cheap. Birth control pills are really cheap as well.

Robin: Here on campus especially they talk about a lot of different methods of contraception, and really work with you on finding what’s best for you. Whether that is a day-to-day thing like a pill, whether it’s using condoms, hormonal, non-hormonal, long term, like IUD’S.

Chris H: If you understand how the birth control works, then you’re more likely to, be comfortable with it and feel like it is going to be effective.

Robin: Explore your options. Find out what’s best for you. And then trying to get the contraceptive method that you can afford that plays into all of that is really important.

Whoa! We’ve talked about a lot of different contraception options.

It can be a little overwhelming to figure out which one might be right for you. In this next section we’ll be using language that focuses on you, the individual, although we recognize that this does not speak to all people. If this information does not apply to your body, or the choices you’re currently making regarding your sexual expression, try to go through the information with the mentality that you are becoming an informed person who can educate other people on these topics, including potential future partners.

We’re going to go over a checklist of things to consider when making a decision. It’s very important to find something that works for you because then you’ll be more likely to stick to using it consistently. Rest assured, if you try something and it’s just not working out, you’ve got a wealth of other options.
When you choose to be sexually active, the first thing to consider is how you’re going to protect yourself from STIs.

Internal and external condoms are the only methods of contraception that also provide STI protection. Would you rather use condoms alone, or use them in conjunction with another method of contraception?

One trend that we’ve noticed is that many college students use condoms for casual sex or at the beginning of a relationship, but then discontinue using them and strictly rely on other forms of contraception as the relationship becomes long term. We’re not going to make a judgment call of whether that’s okay—that’s for you to decide. What we will say is that you and your partner should consider a few things before making a decision. Have both of you been tested for STIs before and after you became sexually active with each other? How comfortable are you with the effectiveness of your method of contraception? Have you thought about what you might do if you became pregnant or got an STI?

**Community Resources**

Free safer sex supplies at the U of MN:

- SHADE
- Health Advocates
The next thing to consider is the effectiveness of the method.

Each method has a variable degree of difference in rates of perfect versus typical use. Would you have more piece of mind if you used a method with a higher level of effectiveness? Have you thought of pairing two methods together to increase effectiveness? Many people use the phrase condoms + to describe the additional form of protection condoms offer. People pair barrier methods like sponges, diaphragms, or caps with external condoms or a form of hormonal contraception. Even adding spermicide can increase the level of protection.
One thing related to effectiveness is the amount of user action. Some methods require more user action, like using diaphragm with spermicide every single time, and therefore have higher rates of user error that can result in lower rates of effectiveness. This is something you may want to think about.

Resources:
- CDC - U.S. Selected Practice Recommendations for Contraceptive Use
- WHO - Selected Practice Recommendations for Contraceptive Use

Time is the next thing to consider.
Whether you go to the store for condoms, make an appointment for the shot every three months, or schedule time for sterilization, it takes some time to obtain every method. There is also the time required to use or prepare to use the method. For example, the pill requires you to take it at roughly the same time every day, and the ring has to be taken out after three weeks, left out for one week, and then replaced with a new one. Do you think you would remember to do these things? Some people are great at keeping on top of these methods, but others would rather use something that requires less remembering or user action.

Spontaneity is a sub-factor of time. Do you want a method that doesn’t require you to do anything in the heat of the moment, or is it no big deal to take a few seconds to a few minutes to push pause while you get everything in order? Some methods can be put in hours ahead of time, while others require an erect penis at that moment. Either way, you can make this prep time sexy by making it a part of foreplay, assisting your partner, or having your partner assist you in creative ways.

Another major consideration is hormones. Most of the long-term and more effective forms of contraception contain hormones. Some people figure out that they are more sensitive to estrogen and would rather stick with something that has progestin only, like the implant, the shot, the mini-pill, or the hormonal IUDs. Some people figure out that they are okay with estrogen, but prefer a low dose, like the ring or some pills. Sometimes you just have to experiment with what composition of hormones is right for you. Others want to forgo hormones completely. These people can stick to barrier methods or the long-term methods of the ParaGard® IUD or sterilization.
Side effects come up as another deciding factor for contraception and are something to be aware of when starting a new method.

Every method has the potential for side effects, even non-hormonal methods. It’s important to do some research from reliable sources of health information and consult with your provider about side effects. As we’ve already mentioned, those caused by hormones will usually go away in 3-6 months. The thing is, it’s impossible to predict whether or not you’ll experience side effects. How comfortable are you handling these things?

*Some methods have the potential to change the menstrual cycle.*
Would that influence your decision to use the method? Is it important to you to experience a period, or would you rather go without? Do you care if it gets heavier or lighter?

*Do you care if the method is hanging out inside of your body?*
The IUD, some sterilization inserts, the implant, and the ring are inside of you from anywhere from 3 weeks to the rest of your life. Does the idea of putting your fingers inside your vagina make you uncomfortable? The ring, sponge, diaphragm, cap, and internal condom all require that you or your partner insert and remove these devices. How do you feel about needles? The shot requires an injection every 3 months and the implant is inserted by injecting the device under the skin.

*Are you worried that people will be able to tell that you’re using contraceptives?*
Some methods, like the patch, are more obvious depending on what you’re wearing. Do you care if someone sees you taking your pill? Some methods are going to leave some evidence, like packaging. Others can be more hidden, like the shot, implant, or IUDs.

*How long do you want to be on contraception?*
If you want a long-term option that requires minimal user action, you may want to consider long acting reversible contraceptives, or LARCs, which include the implant and IUDs. You’re looking at protection anywhere from 3-12 years based on the method. The American College of Obstetricians and Gynecologists recommends that LARCs be given as first line contraceptives for both adolescents and adults.¹

*Cost can be a big deciding factor for contraception.*
These costs can include the price of the actual method, or the cost involved in obtaining the method, like a visit to a provider, taking time off from work or school, or gas money. The cost of contraception can change based on whether or not you have insurance. Some states offer free contraception if you meet a
few guidelines based on income and the number of dependents or children you have, and most college students usually meet these requirements. Contact a local sexual health clinic to see if you qualify. If you don’t have a state program like this, many sexual health clinics offer their services on a sliding-fee scale based on your income. If you do have insurance, even if it’s a student health insurance plan, you’re in luck! The health care reform act of 2012 mandated that all FDA-approved forms of contraception have to be covered by your insurance without a co-pay or deductible because they are considered preventative care, which means no out-of-pocket cost for you! Check with your insurance plan to see when these provisions went or will go into effect.

If you do end up having to pay for contraception, you might want to assess the month-by-month breakdown of the methods you’re considering. Some methods may be expensive up front, like LARCs, but are actually cheaper in the long run. Some methods may require you to pay based on how many months’ supply you are taking home with you at one time.

**Community Resource**
Free contraception for Minnesotans who meet income requirements – Minnesota Family Planning Program

We’ve given you a lot of things to consider when choosing a method of contraception. While it may be overwhelming, know that you can discuss your options with your provider and they can answer any questions you have.

**Community Resource**
MN Family Planning and STD Hotline

Information in these course lessons is provided for educational purposes. It is not meant to and cannot substitute for advice or care provided by an in-person medical professional. The information contained herein is not meant to be used to diagnose or treat a health problem or disease, or for prescribing any medication. You should always consult your own healthcare
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